

BEST AVAILABLE COPY

POSITION	ID NO.	DATE
CLASSIFIER	19	7/29/94
EXAMINER	3418	3/4/94
TYPIST	51-2	
VERIFIER	7-1	7-1-94
CORPS CORR.		
SPEC. HAND	VHS	J-25-94
FILE MAINT.	IC	3-8-94
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	9 3 10 1 12 2 24 28 15 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50
1 1	✓ ✓ ✓ =
2 2	✓ ✓ ✓ =
3 3	✓ ✓ ✓ =
4 4	✓ ✓ ✓ =
5 5	✓ ✓ ✓ =
6 6	✓ ✓ ✓ =
11 7	✓ ✓ ✓ =
12 8	✓ ✓ ✓ =
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9 11	✓ ✓ =
10 12	✓ ✓ =
10 13	✓ ✓ =
13 15	✓ ✓ =
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SYMBOLS

✓	Rejected
=	Allowed
- (Through number)	Canceled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date
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